_				•				<u> </u>	101	180	297	びフ		
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Application or Docket Number Application or Docket Number													
-	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN					
Ī	OTAL CLAIM	Ş	16		199			RATE	FEE	OR 	RATE	FEE		
F	OR	NUMBER FILED		NUMBER EXTRA			BASIC F	£ 385.00	OR	BASIC FE	+			
7	OTAL CHARGE	/6 minus 20=		_			X\$ 9=		OR	X\$18=	<u> </u>			
in	DEPENDENT (/ minus 3 =		•			X43=	╁╌	┨¨¨	X86=	 			
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT					+145=	+	OR		 		
•	f the differenc	e in column 1 is	less than zero, enter "0" in c			column 2		TOTAL	╀	OR	+290=	000		
1	1-116	CLAIMS AS AMENDED - PART II							<u> </u>	JOR	TOTAL	THAN		
Y	25 9	(Column 1) (Column 2) (Cotumn 3 CLAIMS HIGHEST							ENTITY	OR	SMALL			
AMENDMENT A.		REMAINING AFTER AMENOMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Ş	Total	.16	Minus	-2	<u> </u>	-		X\$ 9=		OR	X\$18=			
AME	Independent	• /	Minus .		3	= /		X43=	: /	OR	X86=			
L_	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENI	CLAIM	/		+145=	1/	OR	+390=			
Λ	1114				•		L	TOTAL			YOYAL			
4	1197	(Column 1) (Column 2) (Column 3)								. .	70011.122			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 16	Minus	- 2	0	•		X\$ 9=	. /	OR	X\$18=			
AME	Independent	NTATION OF MI	Minus	/	3	-/-		X43≈ ·	17	OR	X86=			
	FINST PRESE	NIATION OF MIL	SCIPLE DE	·	LAIM	(+145= . TOTAL	1	OR	+290=	/ .		
	•					•	·	DDIT. FEE	4	OR ,	TOTAL ODIT, FEE	 		
	`	(Column 1) CLAIMS		(Column	ST	(Column 3)	_	,	400			422		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOL PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
2	Total	. 16	Minus	- 2	0			X\$ 9=		OR	X\$18=			
N N	Independent	NEATION OF ARI	Minus	Z		-=		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	·		
* If the entry in column 1 is less than the entry in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number bound in the appropriate box in column 1.														
	no Tagnest Num	per Previously Paid	FOF (Total or	Independent) is the I	highest number	loune	in the app	ropriate box	in colui	mn t.			
RM PTO-875 (Rev. 1903) Patient and Tradematic Office, U.S. DEPARTMENT OF COMMERCE														